FORM D

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response . . . 16.00

	SEC US	E ONLY
Prefix		Serial
	1	
	DATE RE	CEIVED

	-1000.						
Name of Offering AVI Value Fund LLC (s is an amendmer	nt and name has ch	anged, and ir	ndicate char	nge.)	
Filing Under (Check bo	ox(es) that apply):	[] Rule 504	[] Rule 505	[X] Rule	e 506 [] Section 4(6) [] ULOE
Type of Filing:	[X] New Filing	[X]	Amendment			4	
		A. BASI	C IDENTIFICATIO	N DATA		<u>.</u>	
Enter the information re	equested about the issu	ier					
Name of Issuer AVI Value Fund LLC	([]] check if this	s is an amendmer	nt and name has ch	anged, and ir	ndicate char	nge.)	08052711
	Offices (Number Stors (Cayman) Ltd., P Grand Cayman Cayma	O Box 309GT, Ú	, State, Zip Code) gland House, Sout	h Church	Telephone 345-949-8		cluding Area Code)
	usiness Operations (Nu tive Offices) Same As		City, State, Zip Coo	le)	Telephone Same As	•	cluding Area Code)
Brief Description of Bu The Issuer seeks to it	siness nvest in publicly trade	d equity, fixed in	ncome and other t	pes of secu	ırities.		
Type of Business Orga	anization						DDOOESSED
[] corporation		[] limited par	tnership, already fo	ormed	[X] oth	er (please s l Liability Co	pecifyPROCESSED
[] business trus	st	[] limited par	tnership, to be forn	ned			JUN 2 5 2008 SH
Actual or Estimated Da	ate of Incorporation or C	organization:	Month/Year 05/2004	[X] Actu	ual [] Estimated	
Jurisdiction of Incorpor	ration or Organization:	•	r U.S. Postal Servic			DE	THOMSON REUTERS

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, it received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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- Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [X] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) Asset Value Investors (Cayman) Ltd. (the	"Managing Member")			
Business or Residence Address (Numb P.O. Box 309GT, Ugland House, South Ch George Town, Grand Cayman Cayman Isl		p Code)		
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual) Lau, Kimmberly				
Business or Residence Address (Numbero Asset Value Investors (Cayman) Ltd., George Town, Grand Cayman Cayman Isl				
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual) Walton, John				
Business or Residence Address (Number of Asset Value Investors (Cayman) Ltd, F George Town, Grand Cayman Cayman Isl				
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number	per and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Numb	per and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Numb	per and Street, City, State, Zi	p Code)	<u></u>	

	B. INFORMATION ABOUT OFFERING					
1.	Yes No					
2.	\$* 5,000,000					
3.	(* Subject to waiver by the General Partner of the Issuer.) Does the offering permit joint ownership of a single unit?	Yes No				
		[x] []				
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.					
	Il Name (Last name first, if individual) t applicable.					
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)					
Na	me of Associated Broker or Dealer					
	ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers heck "All States" or check individual States)					
•		ll States HI [] ID []				
]	IL [] IN [] IA [] KS [] KY [] LA [] ME [] MD [] MA [] MI [] MN []	MS [] MO []				
	MT [] NE [] NV [] NH [] NJ [] NM [] NY [] NC [] ND [] OH [] OK [] RI [] SC [] SD [] TN [] TX [] UT [] VT [] VA [] WA [] WV [] WI []	OR [] PA [] WY [] PR []				
	II Name (Last name first, if individual)					
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)					
Na	ame of Associated Broker or Dealer					
	ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers heck "All States" or check individual States)					
2	[] A [] AK [] AZ [] AR [] CA [] CO [] CT [] DE [] DC [] FL [] GA []	ll States HI[] ID[]				
	IL [] IN [] IA [] KS [] KY [] LA [] ME [] MD [] MA [] MI [] MN [] MT [] NE [] NV [] NH [] NJ [] NM [] NY [] NC [] ND [] OH [] OK []	MS [] MO [] OR [] PA []				
	RI[] SC[] SD[] TN[] TX[] UT[] VT[] VA[] WA[] WV[] WI[]	WY [] PR []				
Ful	ıll Name (Last name first, if individual)					
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)					
Na	ame of Associated Broker or Dealer	 -				
	ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers heck "All States" or check individual States)					
	AL[] AK[] AZ[] AR[] CA[] CO[] CT[] DE[] DC[] FL[] GA[]	ll States HI [] ID []				
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	RI[] SC[] SD[] TN[] TX[] UT[] VT[] VA[] WA[] WV[] WI[]	WY [] PR []				

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate the columns below the amounts of the securities				
	offered for exchange and already exchanged. Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$	<u>0</u>	\$	<u>0</u>
	Equity:	\$	<u>0</u>	\$	<u>0</u>
	□ Common □ Preferred	•	•	•	•
	Convertible Securities (including warrants):		<u>0</u>		<u>0</u>
	Other (Specify: limited liability company interests (the "Interests"))	\$			335,490,00 <u>0</u>
	Total				335,490,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregate
			Number Investors		Dollar Amount of Purchases
	Accredited Investors		<u>22</u>	\$	<u>335,490,000</u>
	Non-accredited Investors		<u>o</u>	\$	<u>o</u>
	Total (for filings under Rule 504 only)		N/A	\$	<u>N/A</u>
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505		N/A	\$	Q
	Regulation A		N/A	\$	<u>0</u> 0 0 0
	Rule 504		N/A	\$	Ö
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an		<u>N/A</u>	\$	<u>ū</u>
	expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		XI	\$	<u>0</u>
	Printing and Engraving Costs		X	\$	<u>2,500</u>
	Legal Fees Accounting Fees		XI XI	\$	<u>35,000</u>
	Engineering Fees		X	ø ø	<u>7,500</u>
	Sales Commissions (specify finders' fees separately)		Œ	\$	<u>0</u>
	Other Expenses (identify filing fees)		Ø	\$	<u>5,000</u>
	Total		ĸ	\$	<u>50,000</u>

⁽a) Open-ended fund; estimated maximum aggregate offering amount.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

 b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

999,950,000

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes below. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjustment gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Payments to Officers, Directors, &			Payments to		
		Affiliate	es			Others
Salaries and fees	1831	\$	Ō	X	\$	<u>0</u>
Purchase of real estate	X	\$	<u>0</u>	X	\$	<u>0</u>
Purchase, rental or leasing and installation of machinery and equipment	X	\$	<u>0</u>	X	\$	<u>0</u>
Construction or leasing of plant buildings and facilities	\boxtimes	\$	<u>0</u>	X	\$	<u>0</u>
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	X	\$	<u>0</u>	図	\$	<u>o</u>
Repayment of indebtedness	X	\$	<u>0</u>	X	\$	<u>0</u>
Working capital	Œ	\$	<u>0</u>	X	\$	<u>0</u>
Other (specify): Portfolio Investments	X	\$	<u>0</u>	図	\$	999,950,000
Column Totals	图	\$	<u>0</u>	X	\$	999,950,000
Total Payments Listed (column totals added)	X	\$ <u>999,950,000</u>		<u>00</u>		

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)
AVI Value Fund LLC

Name (Print or Type)

Kimmberly Lau

Signature

Date

6-17-08

Attle of Signer (Print or Type)

Director of the Managing Member

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

END